

Alau	alli	a muividuai ivon	ii esic	ieni in	come lax nell	1111	_								
For the year Jan. 1 - Dec. 3	31, 2007,	or other tax year: Beginning:			Ending: ●		_								
							\								
Your first name			Initial	Last name			,								
<b>₩</b> .			ii ii ii ii	Lactrianio			1							ı	
Spouse's first name			Initial	Last name			-i			Your	r social se	curity r	number		
₫ ! •			ii ii ii ii	Lactrianio			1		1		:				
Spouse's first name Present home address	ss (numh	er and street or P.O. Box number)									:	•			
	or (mann)	or and offoot or 1.0. Box numbers							1	Spouse's	s soc. sed	oc. sec. no. if joint return			
City, town or post offi	ice				State ZIP code				1						
A ! Oity, town or post on					State Zii code						:	:			
(							/								
						<i>/</i>		US	E BLAC	K INK T	го со	MPL	ETE RETURN		
Filing Status/	1	• [ \$1,500 Single		3	• [ \$1,500 Married fil	ing separate. Com	plete Spous	e SSN							
Exemptions	•			·	<u> </u>	•		_							
Exemplione	2	● ☐ \$3,000 Married filing joint 4 ● ☐ \$3,000 Head of Family (with qualifying person).													
	5	Wages, salaries, tips, etc.					A Ala.Tax Wit	hhold		<b>B</b> Il Sources			C Alabama Ind	omo	
		(Include spouse's income	it marrie	a tiling joint	t.)		Ala. Lax Will	ineia	"	ii Sources			Alabama mo	ome	
	а					•		00			00	5a		00	
	b					•		00			00	5b		00	
Income	С					•		00			00	5c		00	
and	6	Other income (from page							•		00	6		00	
Adjustments	7	Total income. Add amou							•		00	7		00	
Aujustilients	8	Adjustments to income (f	rom pag	ge 2, Part I	II, line 5)				•		00	8		00	
	9	Adjusted total income.	Subtrac	ct line 8 fro	om line 7			9	•		00	9		00	
	10	Alabama percentage of a	•						%)			10		%	
	11	Other Adjustments (from	page 2,	Part III, lir	ne 5)			11	•		00	11		00	
	12	Adjusted Gross Income	. Subtr	act line 11	from line 9			12	•		00	12		00	
Deductions	13	Check appropriate box. It	f you ite	mize, ente	r amount from Schedule	A, line 29.			Box a or b	MUST be	checked				
You Must Attach a		a Itemized Dec	luctions	3	b Standard D	eduction		. 13	•		00				
Complete copy of Federal Form 1040, Form 1040A, Form 1040EZ, or Form 1040NR if claiming a	14	Federal Income Tax dedi	uction (f	rom page i	2, Part IV, line 7)			14	•		00				
	15	Personal exemption (multiply line 1, 2, 3, or 4 by percentage on line 10)							00	1					
	16	Dependent exemption (fr	om pag	e 2, Part V	′, line 4)			16	•		00	1			
deduction on line 14.	17	Total deductions. Add li	nes 13,	14, 15, an	d 16							17	•	00	
	18	Taxable income. Subtra	ct line 1	7 from line	12, column C							18	•	00	
Tax	19a	Tax due. Enter amount for	rom tax	table or ch	neck if from     Torm	NOL-85A		19a	•		00				
lax	19b	Less credits from Schedu	ıle OC.					19b	•		00	1			
	20	Net tax due Alabama. S	ubtract	19b from 1	9a							20	•	00	
Payments	21	Alabama Income Tax w	ithheld	(from colu	mn A, lines 5a-c)			21	•		00				
	22	Amount paid with extensi	ion (atta	ch Form 4	868A)			22	•		00	1			
	23	2007 estimated/composit	e tax pa	yments (s	ee page 9 of instructions	:)		23	•		00	1			
	24	Total payments. Add line							24	•	00				
AMOUNT YOU OWE	25	If line 20 is larger than lin	e 24, su	btract line	24 from line 20, and ent	er AMOUNT YOU	J OWE.								
		Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST ACCOMPANY PAYMENT.)													
	26	Estimated tax penalty. Al	so inclu	de on line	25 (see instructions page	e 10)		26	•		00				
OVERPAID	27	If line 24 is larger than lin	e 20, su	btract line	20 from line 24 and ente	er amount <b>OVERI</b>	PAID					27	•	00	
OVERPAID	28	Amount of line 27 to be a	pplied to	o your <b>200</b>	8 estimated tax			28	•		00				
REFUND	29	REFUNDED TO YOU. S	ubtract I	ine 28 fron	n line 27. (You must sig	n this return befo	re your refu	nd can b	e process	ed.)		29	•	00	
		Lauthorize a rer	roconto	tive of the	Donartment of Povenue	to discuss my ro	turn and att	aahmant	o with my	proporor			'		
Sign Here		• Lauthorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they													
In Black Ink		are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.													
III DIACK IIIK		Your signature				Date			one numb		ir occup		9		
Кеер а сору			Date				(		le ridiniber   redi ek			oupation			
of this return for your records.		Spouse's signature (if joint return, BOTH must sign)  Date  Daytime telephone number  Spouse's						use's o	coccupation						
ioi youi iooolus.		Spoudo o dignaturo (ii joi	rotuli	., 50 11111	.ac. oigi1/	Daylillik			) ) Spous			ο ο σοσαρατίστη			
							Date	,		011-"		1	Preparer's SSN or F	PTIN	
Paid		Preparer's   CiteCk ii							oyed						
Preparer's		Sylution													
Use Only		if self-employed)						E.I. No.							
	,	and address							41	ZIP Code					

Form 40N	IR (20	007)						Page 2		
PART I				B — All Sour	ces		C — Alabama Sour	ces		
174111	1	Interest and dividend income (attach Schedule B if over \$1500.00)	1	•	00	1	•	00		
	2	Alimony received	2	•	00					
	3	Taxable portion of pensions and annuities (see instructions)	3	•	00	1				
	4	Business income or (loss) (attach Federal Schedule C).		•	00	4	•	00		
)ther	5	Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D)	-	+	00	5	•	00		
Other	6	Rents, Royalties, Partnerships, Estates, Trusts, etc. (attach Schedule E)	-		00	6	•	00		
ncome	7		-	+	00	7	•	00		
See page 11)		Farm income or (loss) (attach Federal Schedule F)	⊢′		- 00	-		100		
	8	Other income (state nature and source)	_   8	•	00	8	•	00		
	9	Total other income. Add lines 1 through 8, column B, and lines 1, 4 through 8, column		-	00			00		
	3	Enter here and also on page 1, line 6.		•	00	9		00		
DADTII	1	IRA deduction, Keogh retirement plan, and self-employed SEP deduction			00	1	•	00		
PART II	2	Penalty on early withdrawal of savings			00	•		00		
	3	Moving Expenses (Attach Federal Form 3903)						$\overline{}$		
Adjustments	•	Place of new employment: City State ZIP		•	00	3	•	00		
o income	4	Self-employed health insurance deduction			00	4	•	00		
See page 12)		• •		_	00	-	•	00		
	5	Add lines 1 through 4. Enter here and also on page 1, line 8, columns B and C				) 3	•	00		
PART III	1	Alimony Paid	_	_	00	-				
	2	Adoption Expenses.			00	1				
Other	3	Add lines 1 and 2, enter here and on page 1, line 11, column B			00	ļ				
Adjustments	4	Enter percentage from page 1, line 10			%					
	5	Multiply line 3 by line 4. Enter here and also page 1, line 11, column C	5	•	00					
PART IV		If you are filing separately on your Alabama return and jointly on your Federal return,		B — All Sour	ces		C — Alabama Sour	200		
		complete all lines below. Otherwise, omit lines 1 through 4.					C — Alabama Soun			
	1	Adjusted total income (from page 1, line 9, columns B and C)	1	•	00	1	•	00		
	2	Spouse's federal adjusted gross income	2	•	00					
ederal	3	Add lines 1 and 2, column B	3	•	00					
ncome Tax	4	Divide line 1, column C, by line 3, column B. Enter percentage here and on line 6				4	•	%		
Deduction	5	Enter Federal Income Tax Liability as shown on your 2007 return				5	•	00		
See page 13)	6	If you completed lines 1 through 4 above, enter percentage from line 4. Otherwise, enter	percenta	ge from page 1, lir	ne 10	6	•	%		
	7	Federal Income Tax deduction allowable.								
		Multiply the amount on line 5 by percentage on line 6. Enter here and on page 1, line 14				7	•	00		
PART V		See instructions for definition of a dependent. NOTE: If you checked filing status 3 (Mar.	ried filing	separate return), y	ou may claim	only i	the			
IAILIV		dependent(s) for whom you <b>separately</b> furnished over 50% of the total support.			·					
	1a	Dependents:	(2	2) Dependent's	(3) Dependen	t's rela-	(4) Did you provide			
		(1) First name Last name	socia	I security number.	tionship to	you.	more than one-half dependent's support?			
Dependents			•							
-			•							
o not include			•							
ourself or our spouse	b	Total number of dependents claimed above					·	• 📖		
ou. opouoo	2	Multiply the total number of dependents claimed on line 1b by the amount from the depe	ndent cha	art on page 9 of ins	tructions	2	•	00		
See page 13)	3	Enter percentage from page 1, line 10		. •		3	•	%		
	4	Dependent exemption allowable. Multiply the amount on line 2 by the percentage on I								
	·	Enter here and on page 1, line 16				4		00		
DADTVI	1	Name of state of which you were a legal resident in 2007				<u> </u>		00		
PART VI	2	Did you file a return with that state for 2007? Yes No If no, state reason when the state for 2007?	nv.							
	-	Did you life a return with that state for 2007: res NO into, state reason wi								
	2	If married, did your spouse receive a separate income for 2007? Yes No	If you i	s vour spouso filip	a a congrato /	Mahar	no roturn? Voc	□No		
	3		ıı y⊌S, I	o your spouse iiilii	y a s <del>c</del> parate 1	าเสมสโ	na return?	☐ INO		
General	4	If yes, enter name here.								
nformation	4	Did you file an Alabama return for 2006? Yes No If no, state reason why:								
	5	Give name and address of your present employer(s). Yours:								
II Taxpayers	_	Your Spouse's:					T			
lust Complete his Section	6	Enter the Adjusted Gross Income reported on your 2007 Federal Individual Income Tax				6	•	00		
ocoudii	7	If you are a shareholder or partner in an Alabama S Corporation or Partnership which filed the Alabama Form PTE-C,								
See page 13)		complete the following information:								
ere page 10)		S Corporation's/Partnership's name	_ FEIN_							
		Amount of payment made by the S Corporation or Partnership on your behalf on the PT	E-C Comp	oosite Return		7	•	00		
		Also, on line 23, page 1, enter this amount and write on the dotted line "PTE-C Composi	te Payme	nt."						